UNITED	UNITED STATES HOUSE OF REPRESENTATIVES	ATIVES FORM B	Page 1 of 6
FINANCIA	FINANCIAL DISCLOSURE STATEMENT	For New Members, Candidates, and New Employees OURCE CENTER	OURCE CENTER
Name:	Jefferson Van Dew	Daytime Telephone:	PH 3: 26
***************************************		OF THE CLERK	PIC CLERK
FILER	New Member of or Candidate for Studies U.S. House of Representatives Diction: 0	State: NJ District: 2 Check if Amendment	(Office Use Only)
STATUS	New Officer or Employee Employing Office:	Staff Filer Type (If Applicable): Shared Principal Assistant toto	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMIN	PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	EACH OF THESE QUESTIONS	

THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE	ATTACH THE C	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?	A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	W-10-1000-1-1000-1-10-1-10-10-100-100
NLY THE SCHEDU	ORRESPONDING	Yes No Y	Yes No	No No	
JLES THAT YOU ARE REQUIRED TO COMPLETE	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of fling?	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? Yes No	
		Z Zo	Yes	Yes No	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

Yes □ No ►	EXEMPTION Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer 'yes' unless you have first consulted with the Committee on Ethics.
₹ □ ₹	TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?

SCHEDULE A - ASSETS & "UNEARNED INCOME"

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					Examples:		For bank and other cash accounts, all interest-beering accounts, all interest-beering accounts, \$5,000, list every financial instruce than \$1,000 in interest-be provide a complete address trental property," and a city and that is nowmership treated, as phat is nowmership treated, as basiness, the nature of its peoprephic location in Block A. Eskelades: Your personal residencement and vacation homes (unicome during the reporting periode the provided property and perioded in the provided provide	all IRAs an (k) plans) pro-	not use only t	ncome during the year.	ch generated	production of income succeeding \$1,000 a	Assets a		
Vanguard Intermediate Term	Vanguard Wellington	Vanguard Total Stock Market ETF	Vanguard S&P 500 Index Fund	ABC Hedge Fund	Simon & Schuster	Mage Corp Stock	For bank and other cash accounts, total the amount in sal interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts. For rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and size. For an ownership interest in a privately held business that is not publicly traded, state they held business that is not publicly traded, state they have business. The nature of its activities, and its peographic location in Block A. Excludes: Your personal residence, including second finemest in, or income derived from, a federal increme during the reporting period); and any financial increment program, including the Thrift Savings Plan. If you report a privately-traded fund that is an excepted investment Fund, please check the TEIF box. If you so choose, you may indicate that an asset or froome source is that of your apouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left. For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that accessed the recording thresholds.	Provide complete names of stocks and muttal fund (do not use only licker symbols).	year,	which generated more than \$200 in "unearned"	withing (a) welch asset they for introduction of income and with a fair market value axceeding \$1,000 at the end of the reporting period.	Vor Incom	BLOCK A	
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Jefferson Van Drew	
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SCHEDULE C - EARNED INCOME

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2017 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,765. The 2018 limit is \$28,050. In addition, certain types of income (notably honoraria, director's fees, and payments for

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

Source (include date of receipt for honoraria)	Турө	Filing	Amount Preceding Year
ABC Trade Association, Baltimore, MD (July 15) State of Manyland	Honorarium Salary	\$0 \$20,000	\$500 \$76,000
EXCITITION: Civil War Roundtable (Oct. 2) Cintanto County Board of Education	Spouse Speech Spouse Salary	N/A	\$1,000
NJ State Senator	Salary	\$17,789	\$47,436
Dentist	Salary	\$31,000	\$87,000
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SCHEDULE D - LIABILITIES

time during the reporting period by bilities secured by real property inclusions have been furnitured to report	
ou, your spous	Name:
y time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting bilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence contains a fundament fundament fundamentally liable) and	Jefferson Van Drew
nt owed during ge on your person	Page_5of6
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(unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child. Report liabilities of over \$10,000 owed to any one creditor at an period. New Members: Members are required to report all lia

				DC.JT		
			Example			
			First Bank of Wilmington, DE	Creditor		
			5/98	Date Liability incurred MO/YR		
			Mortgage on Rental Property, Dover, DE	Type of Liability		
				\$10,001- \$15,000	>	
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				Over \$1,000,000* (Spouse/DC Liability)	*	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization
Chairman (Unpaid) - Peer Review	Atlantic & Cape May Dental Society - Peer Review
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Name: Jeffe	Jefferson Van Drew Page 6	6 of 6
date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment: a leave of	ent: a leave of absence during the period of government service:	ent service:

employer. continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former Identify the

Date	Parties to Agreement	Terms of Agreement
12/16	Myself & State of NJ	Pension

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services